

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

Mooney for Congress

ADDRESS (number and street)

PO Box 1863

Check if different  
than previously  
reported. (ACC)

Martinsburg

WV

25402

2. **FEC IDENTIFICATION NUMBER ▼**

C

C00506774

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

WV

02

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the  
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y

11

D D / Y Y Y Y

25

Y Y Y Y

2014

through

M M / D D / Y Y Y Y

12

D D / Y Y Y Y

31

Y Y Y Y

2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Peter Onoszko

Signature of Treasurer

Peter Onoszko

[Electronically Filed]

Date

M M / D D / Y Y Y Y

01

D D / Y Y Y Y

11

Y Y Y Y

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 71

Write or Type Committee Name

**Mooney for Congress**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	5		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	74632.63	100578.13
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	74632.63	100578.13
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	79200.71	102756.11
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	79200.71	102756.11
8. Cash on Hand at Close of Reporting Period (from Line 27).....	3886.15	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	30934.00	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

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FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Mooney for Congress**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	5		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	4

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date
**11. CONTRIBUTIONS (other than loans) FROM:****(a) Individuals/Persons Other Than Political Committees****(i) Itemized (use Schedule A).....**

26229.63

32979.63

**(ii) Unitemized.....**

6403.00

9398.50

**(iii) TOTAL of contributions from individuals ▶**

32632.63

42378.13

**(b) Political Party Committees.....**

0.00

1200.00

**(c) Other Political Committees (such as PACs).....**

42000.00

57000.00

**(d) The Candidate.....**

0.00

0.00

**(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..**

74632.63

100578.13

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0.00

0.00

**13. LOANS:****(a) Made or Guaranteed by the Candidate.....**

0.00

0.00

**(b) All Other Loans.....**

0.00

0.00

**(c) TOTAL LOANS (add Lines 13(a) and (b)).....**

0.00

0.00

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....**

0.00

0.00

**15. OTHER RECEIPTS (Dividends, Interest, etc.) .....**

0.00

0.00

**16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶**

74632.63

100578.13

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 71

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	79200.71	102756.11
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	5200.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	79200.71	107956.11

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	8454.23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	74632.63
25. SUBTOTAL (add Line 23 and Line 24).....	83086.86
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	79200.71
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	3886.15

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 71

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Mooney for Congress**Full Name (Last, First, Middle Initial)  
**A. JOANNE M. AARSETH**

Mailing Address 20640 MIRANDA FALLS SQ

City	State	Zip Code
STERLING	VA	20165-

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		28		2014

Transaction ID : SA11.10203

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. DANA ANDERSON**

Mailing Address 100 FALL CREEK RD.

City	State	Zip Code
LAWRENCE	KS	66049-9067

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MACERICHOccupation  
VICE CHAIRMAN

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		17		2014

Transaction ID : SA11.10085

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. PAUL ARBUCKLE**

Mailing Address 1218 W. MAIN AVE APT.11

City	State	Zip Code
PUYALLUP	WA	98371-5210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		17		2014

Transaction ID : SA11.10102

Amount of Each Receipt this Period

30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

330.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

A. Full Name (Last, First, Middle Initial)  
**CRESENCIO ARCOS**

Mailing Address 1821 SAN JACINTO ST

City State Zip Code  
CASTROVILLE TX 78009-4332

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		28		2014

Transaction ID : SA11.10249

Amount of Each Receipt this Period

150.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)  
**MARSHA BAILEY**

Mailing Address 201 CARRINGTON DRIVE

City State Zip Code  
HURRICANE WV 25526-9050

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
OCCUPATIONAL AND ENVIRONMENTAL HEALTHOccupation  
PHYSICIAN

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		16		2014

Transaction ID : SA11.10336

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)  
**RAY R. BARRETT, JR.**

Mailing Address HC 34 BOX 3

City State Zip Code  
MIDKIFF TX 79755-9801

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELFOccupation  
RANCHER

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		24		2014

Transaction ID : SA11.10181

Amount of Each Receipt this Period

300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

600.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**RAY R. BARRETT, JR.**

Mailing Address HC 34 BOX 3

City  
**MIDKIFF**

State  
**TX**

Zip Code  
**79755-9801**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF**

Occupation  
**RANCHER**

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

**1200.00**

Date of Receipt

**12 / 28 / 2014**

Transaction ID : SA11.10247

Amount of Each Receipt this Period

**300.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**KATHARINE B. BECKER**

Mailing Address 1234 STAUNTON RD.

City  
**CHARLESTON**

State  
**WV**

Zip Code  
**25314-1437**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

**3600.00**

Date of Receipt

**12 / 18 / 2014**

Transaction ID : SA11.10142

Amount of Each Receipt this Period

**1000.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**BROCK BIERMAN**

Mailing Address 35086 HARRY BYRD HIGHWAY

City  
**ROUND HILL**

State  
**VA**

Zip Code  
**20141-2124**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SENIOR DIRECTOR**

Occupation  
**ANCESTRY.COM**

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

**650.00**

Date of Receipt

**12 / 10 / 2014**

Transaction ID : SA11.10274

Amount of Each Receipt this Period

**250.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1550.00**

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**MR. DENNIS E. BLACK****A.**

Mailing Address 3 LOCUST DR.

City

THURMONT

State

MD

Zip Code

21788-1733

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FEDERAL ACQUISITIONS

Occupation

CONSULTANT

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2014

**Transaction ID : SA11.10144**

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**FRANCES BOLTZ****B.**

Mailing Address 14930 HARSHIP FARM PL

City

WALDORF

State

MD

Zip Code

20601-4421

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

251.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		28		2014

**Transaction ID : SA11.10231**

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**WILLIAM W. BOYD****C.**

Mailing Address PO BOX 1147

City

TALLAHASSEE

State

FL

Zip Code

32302-1147

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		28		2014

**Transaction ID : SA11.10243**

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1050.00



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**LEROY E. BRANDT**

Mailing Address 2630 W. PARK STONE DR.

City <b>MERIDIAN</b>	State <b>ID</b>	Zip Code <b>83646-7505</b>
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer <b>INFORMATION REQUESTED PER BEST EFF</b>	Occupation <b>INFORMATION REQUESTED PER BEST EFF</b>
---	---

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
**305.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		28		2014

**Transaction ID : SA11.10207**

Amount of Each Receipt this Period

**25.00**

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**CAROLE BROWN**

Mailing Address 136 ISLAND CREEK DR

City <b>INDIAN RIVER SHORES</b>	State <b>FL</b>	Zip Code <b>32963-3301</b>
------------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer <b>NONE</b>	Occupation <b>RETIRED</b>
---------------------------------	------------------------------

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
**3500.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		24		2014

**Transaction ID : SA11.10162**

Amount of Each Receipt this Period

**500.00**

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**DICEY S. CHILDERS**

Mailing Address 8517 JOY RD.

City <b>BLOUNTSVILLE</b>	State <b>AL</b>	Zip Code <b>35031-4489</b>
-----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer <b>The Alabaster Box</b>	Occupation <b>Owner</b>
--	----------------------------

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
**225.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		17		2014

**Transaction ID : SA11.10082**

Amount of Each Receipt this Period

**100.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

<b>625.00</b>
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**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 71

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**JOAN K. CHITIEA**

Mailing Address 1980 SILVERLEAF CIR UNIT 207

City

CARLSBAD

State

CA

Zip Code

92009-8426

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		28		2014

Transaction ID : SA11.10194

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**PHILIP H. DAVIS**

Mailing Address 713 TRILLIUM CIRCLE

City

MARYVILLE

State

TN

Zip Code

37804-3655

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

620.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		17		2014

Transaction ID : SA11.10099

Amount of Each Receipt this Period

20.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**PHILIP H. DAVIS**

Mailing Address 713 TRILLIUM CIRCLE

City

MARYVILLE

State

TN

Zip Code

37804-3655

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

620.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		16		2014

Transaction ID : SA11.10340

Amount of Each Receipt this Period

25.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

95.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER:

PAGE 11 OF 71

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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 NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**DONALD DICK**

Mailing Address 114 EUCALYPTUS HILL CR.

City

SANTA BARBARA

State

CA

Zip Code

93103-2808

FEC ID number of contributing federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

205.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		17		2014

Transaction ID : SA11.10101

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**MR. KENNETH DUGGIN**

Mailing Address 4295 NEITZEY PLACE

City

ALEXANDRIA

State

VA

Zip Code

22309-3070

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		17		2014

Transaction ID : SA11.10086

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**MS. RITA F. EAVES**

Mailing Address 2499 FIVE SHILLINGS RD.

City

FREDERICK

State

MD

Zip Code

21701-9325

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2014

Transaction ID : SA11.10331

Amount of Each Receipt this Period

20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

320.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**ALBERT EXNER**

Mailing Address 17744 SE 117TH CIRCLE

City

SUMMERFIELD

State

FL

Zip Code

34491-7861

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		17		2014

Transaction ID : SA11.10097

Amount of Each Receipt this Period

20.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**WILLIAM G. FAULKES**

Mailing Address 805 WISTERIA DR.

City

SOUTH CHARLESTON

State

WV

Zip Code

25309-2001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BILCO CONSTRUCTION

Occupation

PRESIDENT

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		28		2014

Transaction ID : SA11.10252

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**VICTORIA FORD**

Mailing Address 4303 FOREST PARK RD.

City

JACKSONVILLE

State

FL

Zip Code

32210-6027

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		17		2014

Transaction ID : SA11.10092

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

320.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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 NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**VICTORIA FORD**

Mailing Address 4303 FOREST PARK RD.

City

JACKSONVILLE

State

FL

Zip Code

32210-6027

FEC ID number of contributing federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		10		2014

Transaction ID : SA11.10293

Amount of Each Receipt this Period

150.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**DAVID J. FRENCH**

Mailing Address W303N2568 MAPLE AVE.

City

PEWAUKEE

State

WI

Zip Code

53072-4243

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		24		2014

Transaction ID : SA11.10188

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**JOSE FUENTES**

Mailing Address 750 9TH ST. NW, STE. 750

City

WASHINGTON

State

DC

Zip Code

20001-4589

FEC ID number of contributing federal political committee.

C

Name of Employer

EASTPORT STRATEGIES LLC

Occupation

ATTORNEY

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2014

Transaction ID : SA11.10132

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

650.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**Full Name (Last, First, Middle Initial)  
**KARL M. GALLANT**

A. Mailing Address 9506 GAUGE DR.

City	State	Zip Code
FAIRFAX STATION	VA	22039-3203

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ADUSTON CONSULTINGOccupation  
OWNERReceipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		11		2014

Transaction ID : SA11.10294

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MIKE GARCIA**

Mailing Address 10121 ORANGE AVE.

City	State	Zip Code
CUPERTINO	CA	95014-2828

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIREDReceipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1760.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		17		2014

Transaction ID : SA11.10089

Amount of Each Receipt this Period

800.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. BETTY GARDNER**

Mailing Address 1572 GOODIN HOLLOW RD.

City	State	Zip Code
NOEL	MO	64854-7235

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIREDReceipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

680.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		24		2014

Transaction ID : SA11.10178

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1075.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**MR. ROBERT GERHARD**

Mailing Address 331 WINDING WWAY

City

GLENSIDE

State

PA

Zip Code

19038-2114

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

282.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		11		2014

Transaction ID : SA11.10306

Amount of Each Receipt this Period

10.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**LORNA GLADSTONE**

Mailing Address 1161 CREST LANE

City

MCLEAN

State

VA

Zip Code

22101-1805

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		11		2014

Transaction ID : SA11.10300

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**MR. KINGDON GOULD**

Mailing Address 7861 MURRAY HILL RD

City

LAUREL

State

MD

Zip Code

20723-5716

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

LAWYER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

4200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		28		2014

Transaction ID : SA11.10253

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1510.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. KINGDON GOULD**  
Mailing Address 7861 MURRAY HILL RD

City State Zip Code  
**LAUREL MD 20723-5716**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF**

Occupation  
**LAWYER**

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
**4200.00**

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
**12 16 2014**

Transaction ID : SA11.10368

Amount of Each Receipt this Period

**600.00**

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**TOM GRAFF**  
Mailing Address 108 GRAFF LANE

City State Zip Code  
**CHARLESTON WV 25304-1065**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**BOWLES RICE LLP**

Occupation  
**ATTORNEY AT LAW**

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
**12 18 2014**

Transaction ID : SA11.10141

Amount of Each Receipt this Period

**1000.00**

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**JESSICA GRANEY**  
Mailing Address 3 QUARRY RIDGE

City State Zip Code  
**CHARLESTON WV 25304-1052**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**Homemaker**

Occupation  
**Homemaker**

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
**12 18 2014**

Transaction ID : SA11.10115

Amount of Each Receipt this Period

**1000.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2600.00**



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**CHRIS R. HAMILTON****A.**

Mailing Address 1 EVERGREEN DR.

City

ELKVIEW

State

WV

Zip Code

25071-9314

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WV Coal AssociationOccupation  
Senior VP

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

**Transaction ID : SA11.10117**

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**MARY HARDESTY****B.**

Mailing Address 3120 N. GREYSTONE DR.

City

MORGANTOWN

State

WV

Zip Code

26508-8601

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
Homemaker

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		28		2014

**Transaction ID : SA11.10225**

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**MARY C. HARPER****C.**

Mailing Address 2817 US 220 SOUTH

City

MOOREFIELD

State

WV

Zip Code

26836-

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

314.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		24		2014

**Transaction ID : SA11.10182**

Amount of Each Receipt this Period

51.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

351.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**BOBBYE F. HARRIS****A.**

Mailing Address 135 WINDSOR DR.

City

CALHOUN

State

GA

Zip Code

30701-2055

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		28		2014

**Transaction ID : SA11.10246**

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**COL RAYMOND S. HAWTHORNE****B.**

Mailing Address 39 VALLEY DR.

City

ANNVILLE

State

PA

Zip Code

17003-9522

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		28		2014

**Transaction ID : SA11.10240**

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**JOHN T. HAZEL JR.****C.**

Mailing Address 6254 HUNTLEY RD.

City

BROAD RUN

State

VA

Zip Code

20137-1830

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		10		2014

**Transaction ID : SA11.10272**

Amount of Each Receipt this Period

100.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

375.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**CHARLES B. HENDERSON****A.**

Mailing Address 1195 LA MOREE RD. #34

City

SAN MARCOS

State

CA

Zip Code

92078-4527

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

315.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		17		2014

**Transaction ID : SA11.10103**

Amount of Each Receipt this Period

20.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**CHARLES B. HENDERSON****B.**

Mailing Address 1195 LA MOREE RD. #34

City

SAN MARCOS

State

CA

Zip Code

92078-4527

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

315.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		24		2014

**Transaction ID : SA11.10180**

Amount of Each Receipt this Period

20.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**PAUL HINMAN****C.**

Mailing Address 1833 DEVONDALE CIR

City

CHARLESTON

State

WV

Zip Code

25314-2205

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		16		2014

**Transaction ID : SA11.10355**

Amount of Each Receipt this Period

25.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

65.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**TIMOTHY HOGAN**

Mailing Address 2661 RIVA RD STE 300

City

ANNAPOLIS

State

MD

Zip Code

21401-7352

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOGAN COMPANIESOccupation  
PRESIDENT

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		17		2014

Transaction ID : SA11.10093

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**BILL HOLDEN**

Mailing Address 4467 PLANTATION DR.

City

FAIR OAKS

State

CA

Zip Code

95628-5638

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
STATE OF CALIFORNIAOccupation  
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		24		2014

Transaction ID : SA11.10179

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**MR. ROBERT HOLSTEIN**

Mailing Address 3318 OAKWOOD DRIVE

City

NEW WINDSOR

State

MD

Zip Code

21776-8212

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		29		2014

Transaction ID : SA11.10269

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

250.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**BERTHA HOSKINS**

Mailing Address 2202 SPINNAKER COURT

City

RESTON

State

VA

Zip Code

20191-4704

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

CPA

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		10		2014

Transaction ID : SA11.10280

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**WILLIAM HOTALING**

Mailing Address 125 QUASSAICK AVE

City

NEW WINDSOR

State

NY

Zip Code

12553-6635

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		11		2014

Transaction ID : SA11.10322

Amount of Each Receipt this Period

300.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**NANCY B. HUNTER**

Mailing Address 4756 JOHN SCOTT DR.

City

LYNCHBURG

State

VA

Zip Code

24503-1004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		11		2014

Transaction ID : SA11.10302

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

750.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 22 OF 71

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**BRIAN KEELTY**

Mailing Address 205 E JOPPA ROAD NO. 2203

City

TOWSON

State

MD

Zip Code

21286-3231

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2014

Transaction ID : SA11.10332

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**REBECCA ANN KEEVER-TAYLOR**

Mailing Address 249 SAYRE LN.

City

EVANS

State

WV

Zip Code

25241-8015

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		16		2014

Transaction ID : SA11.10362

Amount of Each Receipt this Period

75.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**MR. BOB LAWRENCE**

Mailing Address 1610 N SALISBURY BLVD.

City

SALISBURY

State

MD

Zip Code

21801-3329

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1108.87

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		28		2014

Transaction ID : SA11.10190

Amount of Each Receipt this Period

76.63

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

251.63

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**Full Name (Last, First, Middle Initial)  
**HERBERT ALAN LEVIN**

Mailing Address 724 E GRINNELL DR.

City	State	Zip Code
BURBANK	CA	91501-1720

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DEPARTMENT OF JUSTICEOccupation  
LAWYER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		16		2014

Transaction ID : SA11.10337

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**MARJORIE LINDSEY**

Mailing Address 10202 DUTCH IRIS DR.

City	State	Zip Code
BAKERSFIELD	CA	93311-3770

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		17		2014

Transaction ID : SA11.10084

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**GEORGIA LIZAS**

Mailing Address P.O. BOX 2486

City	State	Zip Code
KENSINGTON	MD	20891-2486

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		24		2014

Transaction ID : SA11.10187

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

250.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 24 OF 71

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**ANTONIO LONGO**

Mailing Address 4014 FORT WORTH AVENUE

City

ALEXANDRIA

State

VA

Zip Code

22304-1713

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2014

Transaction ID : SA11.10139

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**HENRY MADLEY**

Mailing Address 3648 62ND AVE. E.

City

BRADENTON

State

FL

Zip Code

34203-5429

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		17		2014

Transaction ID : SA11.10108

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**HENRY MADLEY**

Mailing Address 3648 62ND AVE. E.

City

BRADENTON

State

FL

Zip Code

34203-5429

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		16		2014

Transaction ID : SA11.10374

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

350.00



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 25 OF 71

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**Full Name (Last, First, Middle Initial)  
**A. HELEN MARSHALL**

Mailing Address 827 SUSAN AVE

City	State	Zip Code
WOODSTOCK	VA	22664-1133

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

725.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		29		2014

Transaction ID : SA11.10267

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. DAVID MCCAIN**

Mailing Address 13223 FAIRFAX ROAD

City	State	Zip Code
HAGERSTOWN	MD	21742-2639

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ELECTROMET CORPORATIONOccupation  
CEO

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		11		2014

Transaction ID : SA11.10297

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MR. DON MCINNIS**

Mailing Address 139 OLD BILLERICA ROAD

City	State	Zip Code
BEDFORD	MA	01730-1265

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		28		2014

Transaction ID : SA11.10196

Amount of Each Receipt this Period

75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1125.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**BLANCHE MCKAY**

Mailing Address 5743 JAMMES RD.

City

JACKSONVILLE

State

FL

Zip Code

32244-1807

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFF

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2014

Transaction ID : SA11.10323

Amount of Each Receipt this Period

35.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**EMORY MELTON**

Mailing Address PO BOX 488

City

CASSVILLE

State

MO

Zip Code

65625-0488

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

ATTORNEY

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2014

Transaction ID : SA11.10152

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**RAMON MENA**

Mailing Address P.O. BOX 602

City

HARPERS FERRY

State

WV

Zip Code

25425-0602

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DON

Occupation

PROGRAM ANALYST

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		24		2014

Transaction ID : SA11.10168

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

160.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**ALAN CLARK MILLER**

Mailing Address 1212 N. WATER

City

SILVERTON

State

OR

Zip Code

97381-1337

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		10		2014

Transaction ID : SA11.10282

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**SHARON MINTER**

Mailing Address P.O. BOX 951845

City

LAKE MARY

State

FL

Zip Code

32795-1845

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

200.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		24		2014

Transaction ID : SA11.10160

Amount of Each Receipt this Period

77.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**SHARON MINTER**

Mailing Address P.O. BOX 951845

City

LAKE MARY

State

FL

Zip Code

32795-1845

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

200.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		28		2014

Transaction ID : SA11.10211

Amount of Each Receipt this Period

60.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

237.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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 NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

 A. Full Name (Last, First, Middle Initial)  
**MR. EDWARD P. MOONEY SR.**  
 Mailing Address 7 OCEAN DR

City	State	Zip Code
JUPITER	FL	33469-3512

 FEC ID number of contributing  
 federal political committee.

 C

 Name of Employer  
 NONE

 Occupation  
 RETIRED

 Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

 Election Cycle-to-Date  
 1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		17		2014

Transaction ID : SA11.10080

Amount of Each Receipt this Period

 200.00

CONTRIBUTION

 B. Full Name (Last, First, Middle Initial)  
**ROBERT O. NAEGELE JR.**  
 Mailing Address 7993 VIA VECCHIA

City	State	Zip Code
NAPLES	FL	34108-7531

 FEC ID number of contributing  
 federal political committee.

 C

 Name of Employer  
 Retired

 Occupation  
 Retired

 Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

 Election Cycle-to-Date  
 2200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		17		2014

Transaction ID : SA11.10078

Amount of Each Receipt this Period

 1000.00

CONTRIBUTION

 C. Full Name (Last, First, Middle Initial)  
**ROGER NICHOLSON**  
 Mailing Address 1557 QUARRIER STREET

City	State	Zip Code
CHARLESTON	WV	25311-2407

 FEC ID number of contributing  
 federal political committee.

 C

 Name of Employer  
 SELF-EMPLOYED

 Occupation  
 ATTORNEY

 Receipt For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

 Election Cycle-to-Date  
 3500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2014

Transaction ID : SA11.10125

Amount of Each Receipt this Period

 500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

 1700.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**LARRY D. NUPEN**

Mailing Address 613 N 2ND ST.

City

ABERDEEN

State

SD

Zip Code

57401-2712

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		28		2014

Transaction ID : SA11.10229

Amount of Each Receipt this Period

30.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**RICHARD OLANDER**

Mailing Address 1742 N FITZGERALD LN.

City

HANFORD

State

CA

Zip Code

93230-7901

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

845.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		17		2014

Transaction ID : SA11.10083

Amount of Each Receipt this Period

120.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**GEORGE S. OLIVER**

Mailing Address PO BOX 373

City

CENTER POINT

State

TX

Zip Code

78010-0373

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		29		2014

Transaction ID : SA11.10268

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

175.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**MR. PETER ONOSZKO**

Mailing Address 13 AUBREY CT

City

CHARLES TOWN

State

WV

Zip Code

25414-3809

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		10		2014

Transaction ID : SA11.10281

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**LAWRENCE A. PACK**

Mailing Address 300 SUMMERS ST., SUITE 1450

City

CHARLESTON

State

WV

Zip Code

25301-1631

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CPA

Occupation

Pack CPA LLC.

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2014

Transaction ID : SA11.10123

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**SANDRA PALMER**

Mailing Address 51 DESTINY DR.

City

GERRARDSTOWN

State

WV

Zip Code

25420-4223

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		17		2014

Transaction ID : SA11.10077

Amount of Each Receipt this Period

100.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2900.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**Full Name (Last, First, Middle Initial)  
**MR. LOUIS PANEK**A. Mailing Address **8 HILLSIDE DRIVE**

City	State	Zip Code
DENVER	CO	80215-6609

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		24		2014

Transaction ID : SA11.10184

Amount of Each Receipt this Period

40.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. CHARLES R. PATTON**Mailing Address **2125 PRESIDENTIAL DR.**

City	State	Zip Code
CHARLESTON	WV	25314-2370

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
APPALACHIAN POWEROccupation  
PRESIDENT & COO

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SA11.10134

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MR. DONALD J. PENNIALL**Mailing Address **1413 - 8TH ST.**

City	State	Zip Code
CORONADO	CA	92118-2202

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		17		2014

Transaction ID : SA11.10096

Amount of Each Receipt this Period

600.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1640.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**MR. GEORGE PICOT**

Mailing Address 2611 PATUXENT RIVER ROAD

City

DAVIDSONVILLE

State

MD

Zip Code

21035-

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		11		2014

Transaction ID : SA11.10312

Amount of Each Receipt this Period

75.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**MR. JOHN POWER**

Mailing Address 10895 BETHESDA CHURCH RD

City

DAMASCUS

State

MD

Zip Code

20872-1751

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

512.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2014

Transaction ID : SA11.10143

Amount of Each Receipt this Period

75.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**PAUL PRESSLER**

Mailing Address 5118 HOLLY TERRACE DR.

City

HOUSTON

State

TX

Zip Code

77056-2100

FEC ID number of contributing  
federal political committee.

C

Name of Employer

STATE OF TEXAS

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		17		2014

Transaction ID : SA11.10081

Amount of Each Receipt this Period

100.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

250.00



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**WILLIAM B. RANEY****A.**

Mailing Address 3 CREEKSTONE RDG.

City

SOUTH CHARLESTON

State

WV

Zip Code

25309-8986

FEC ID number of contributing  
federal political committee.

C

Name of Employer

President

Occupation

WV Coal Association

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

**Transaction ID : SA11.10116**

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**JOSEPH ROMAGNOLI****B.**

Mailing Address 14 FOX CHASE RD.

City

CHARLESTON

State

WV

Zip Code

25304-2756

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

433.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		16		2014

**Transaction ID : SA11.10334**

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**RAYMOND ROWE****C.**

Mailing Address 49 EAST E STREET

City

ENCINITAS

State

CA

Zip Code

92024-3612

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2094.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		17		2014

**Transaction ID : SA11.10105**

Amount of Each Receipt this Period

150.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

450.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 OF 71  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>WILLIAM H. RUTLEDGE JR</b>			Date of Receipt M M / D D / Y Y Y Y 12 17 2014	
Mailing Address 5109 MADISON CREEK DR.			<b>Transaction ID : SA11.10087</b>	
City	State	Zip Code		
FORT COLLINS	CO	80528-3016		
FEC ID number of contributing federal political committee.		C		
Name of Employer Retired		Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 350.00		
			Amount of Each Receipt this Period 100.00 CONTRIBUTION	

<b>B.</b> Full Name (Last, First, Middle Initial) <b>WILLIAM H. RUTLEDGE JR</b>			Date of Receipt M M / D D / Y Y Y Y 12 24 2014	
Mailing Address 5109 MADISON CREEK DR.			<b>Transaction ID : SA11.10176</b>	
City	State	Zip Code		
FORT COLLINS	CO	80528-3016		
FEC ID number of contributing federal political committee.		C		
Name of Employer Retired		Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 350.00		
			Amount of Each Receipt this Period 200.00 CONTRIBUTION	

<b>C.</b> Full Name (Last, First, Middle Initial) <b>PEGGY SAUER</b>			Date of Receipt M M / D D / Y Y Y Y 12 17 2014	
Mailing Address 3100 EDWARD ST. NE			<b>Transaction ID : SA11.10073</b>	
City	State	Zip Code		
MINNEAPOLIS	MN	55418-2355		
FEC ID number of contributing federal political committee.		C		
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 310.00		
			Amount of Each Receipt this Period 40.00 CONTRIBUTION	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	340.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**PEGGY SAUER**

Mailing Address 3100 EDWARD ST. NE

City

MINNEAPOLIS

State

MN

Zip Code

55418-2355

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		16		2014

Transaction ID : SA11.10347

Amount of Each Receipt this Period

40.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**DOUGLAS B. SAYRE**

Mailing Address 138 JORDAN LANE

City

DANIELS

State

WV

Zip Code

25832-9110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ROCK &amp; COAL CONSTRUCTION, INC.

Occupation

PRESIDENT

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1933.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SA11.10149

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**FREDRIC SCHLUTER**

Mailing Address 2433 GOLFSIDE DRIVE

City

NAPLES

State

FL

Zip Code

34110-7000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		28		2014

Transaction ID : SA11.10201

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

290.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**MRS. JUDITH SCHMIDT**

Mailing Address 2494A SCRAVEL RD.

City

MYERSVILLE

State

MD

Zip Code

21773-9206

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FREDERICK AIR

Occupation

OWNER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		11		2014

Transaction ID : SA11.10314

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**H. RICHARD SCHUMACHER**

Mailing Address 47 E. 88TH ST. 14A

City

NEW YORK

State

NY

Zip Code

10128-1152

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		10		2014

Transaction ID : SA11.10292

Amount of Each Receipt this Period

10.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**ROBERT SCOVNER**

Mailing Address 6902 YEW COURT

City

FREDERICK

State

MD

Zip Code

21703-7154

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		16		2014

Transaction ID : SA11.10375

Amount of Each Receipt this Period

20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

80.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**PETER SHEAFFER**

Mailing Address PO BOX 28

City

CENTREVILLE

State

MD

Zip Code

21617-0028

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

FARMER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		09		2014

Transaction ID : SA11.10373

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**L. PENDLETON SIEGEL**

Mailing Address 2230 W. RIVERSIDE, #101

City

SPOKANE

State

WA

Zip Code

99201-1442

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		17		2014

Transaction ID : SA11.10094

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**MR. BAKER SMITH**

Mailing Address 3360 EAST TERRELL BRANCH COURT

City

MARIETTA

State

GA

Zip Code

30067-5164

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BDO CONSULTING

Occupation

MANAGEMENT CONSULTANT

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		10		2014

Transaction ID : SA11.10275

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

700.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**C.PAUL SMITH****A.**

Mailing Address 103 FAIRVIEW AVE.

City

FREDERICK

State

MD

Zip Code

21701-4017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Attorney

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		11		2014

**Transaction ID : SA11.10298**

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**MR. TIMOTHY SMITH****B.**

Mailing Address 108 ROLLING RD

City

GAITHERSBURG

State

MD

Zip Code

20877-2044

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.S. NAVYOccupation  
ENGINEER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2014

**Transaction ID : SA11.10326**

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**MADELEINE SOUDEE****C.**

Mailing Address 2325 20TH ST. NW

City

WASHINGTON

State

DC

Zip Code

20009-1411

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

395.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		24		2014

**Transaction ID : SA11.10172**

Amount of Each Receipt this Period

35.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

235.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**LARRY D. SWANN**

Mailing Address 500 LEE STREET EAST NO. 1130B

City

CHARLESTON

State

WV

Zip Code

25301-3200

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELFOccupation  
GOVERNMENT AFFAIRES

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SA11.10126

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**LINDA TEETZ**

Mailing Address 1280 OLDE DOUBLOON DRIVE

City

VERO BEACH

State

FL

Zip Code

32963-2453

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		11		2014

Transaction ID : SA11.10303

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**LAWRENCE R. TELFORD IV**

Mailing Address 1208 TRIBAL CT.

City

ARNOLD

State

MD

Zip Code

21012-2621

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		11		2014

Transaction ID : SA11.10301

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

800.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>TERESA TING</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>17</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	12		17		2014
M M M	/	D D D	/	Y Y Y Y Y									
12		17		2014									
Mailing Address 2860 COUNTRY DR.		<b>Transaction ID : SA11.10109</b>											
City FREMONT	State CA	Zip Code 94536-5338	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>50.00</td> </tr> </table> CONTRIBUTION						50.00				
					50.00								
FEC ID number of contributing federal political committee. C													
Name of Employer RETIRED	Occupation RETIRED												
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>375.00</td> </tr> </table>							375.00					
					375.00								
<b>B.</b> Full Name (Last, First, Middle Initial) <b>TERESA TING</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>22</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	12		22		2014
M M M	/	D D D	/	Y Y Y Y Y									
12		22		2014									
Mailing Address 2860 COUNTRY DR.		<b>Transaction ID : SA11.10356</b>											
City FREMONT	State CA	Zip Code 94536-5338	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>30.00</td> </tr> </table> CONTRIBUTION						30.00				
					30.00								
FEC ID number of contributing federal political committee. C													
Name of Employer RETIRED	Occupation RETIRED												
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>375.00</td> </tr> </table>							375.00					
					375.00								
<b>C.</b> Full Name (Last, First, Middle Initial) <b>JOHN B. VALERIUS</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>17</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	12		17		2014
M M M	/	D D D	/	Y Y Y Y Y									
12		17		2014									
Mailing Address 1909 CANTERBURY ST.		<b>Transaction ID : SA11.10091</b>											
City IRVING	State TX	Zip Code 75062-3551	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>150.00</td> </tr> </table> CONTRIBUTION						150.00				
					150.00								
FEC ID number of contributing federal political committee. C													
Name of Employer RETIRED	Occupation RETIRED												
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>1150.00</td> </tr> </table>							1150.00					
					1150.00								
<b>SUBTOTAL</b> of Receipts This Page (optional).....		<table border="1"> <tr> <td colspan="5"></td> <td>230.00</td> </tr> </table>							230.00				
					230.00								
<b>TOTAL</b> This Period (last page this line number only).....		<table border="1"> <tr> <td colspan="5"></td> <td></td> </tr> </table>											



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**JOHN B. VALERIUS**

Mailing Address 1909 CANTERBURY ST.

City

IRVING

State

TX

Zip Code

75062-3551

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		10		2014

Transaction ID : SA11.10289

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**JANET S. VINEYARD**

Mailing Address 114 SUMMIT RIDGE RD.

City

HURRICANE

State

WV

Zip Code

25526-9211

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OMEGA

Occupation

President

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SA11.10120

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**JEARL WALKER**

Mailing Address 6917 BAL LAKE DR.

City

FORT WORTH

State

TX

Zip Code

76116-8017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

ATTORNEY

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

495.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		10		2014

Transaction ID : SA11.10279

Amount of Each Receipt this Period

50.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

650.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

A. Full Name (Last, First, Middle Initial)  
**ANNIE H. WEEKS**

Mailing Address **3411 ROCK LN.**

City	State	Zip Code
BIRMINGHAM	AL	35210-3708

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
 Retired

Occupation  
 Retired

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
 550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		17		2014

Transaction ID : SA11.10090

Amount of Each Receipt this Period

100.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)  
**MOODY WHARAM**

Mailing Address **4 VALLEY RIDGE COURT**

City	State	Zip Code
TIMONIUM	MD	21093-2934

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
 SELF-EMPLOYED

Occupation  
 HOUSEWIFE

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
 275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		16		2014

Transaction ID : SA11.10353

Amount of Each Receipt this Period

25.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)  
**KIRBY WILBUR**

Mailing Address **2333 DULLES STATION. BLVD**

City	State	Zip Code
HERNDON	VA	20171-6398

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
 YOUNG AMERICA'S FOUNDATION

Occupation  
 EXECUTIVE DIRECTOR

Receipt For: 2014  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
 650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SA11.10135

Amount of Each Receipt this Period

250.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

375.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**EDWARD WONG**

Mailing Address 11186 PACEMONT LN.

City

SAN DIEGO

State

CA

Zip Code

92126-4876

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		17		2014

Transaction ID : SA11.10104

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**DR. THOMAS G. ZORC**

Mailing Address 8608 COUNTRY CLUB DR

City

BETHESDA

State

MD

Zip Code

20817-4578

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CHEVY CHASE SURGICAL ASSOC.

Occupation

PHYSICIAN

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		28		2014

Transaction ID : SA11.10248

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

525.00

26229.63

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**ALPHA NATURAL RESOURCES PAC**

Mailing Address 1301 PENNSYLVANIA AVE. NW  
SUITE 404

City	State	Zip Code
WASHINGTON	DC	20004-1730

FEC ID number of contributing  
federal political committee.

**C** C00348524

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		11		2014

Transaction ID : SA11.10295

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**AMERICAN ASSOCIATION OF NURSE ANESTHETISTS CRNA PAC**

Mailing Address 25 MASSACHUSETTS AVE. NW SUITE 550

City	State	Zip Code
WASHINGTON	DC	20001-1408

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2014

Transaction ID : SA11.10133

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**ARCH PAC**

Mailing Address ONE CITY PLACE DR.

City	State	Zip Code
ST. LOUIS	MO	63141-7014

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		17		2014

Transaction ID : SA11.10076

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

6000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Mooney for Congress****A.** Full Name (Last, First, Middle Initial)  
**BRYAN CAVE LLP POLITICAL FUND**

Mailing Address 1155 F ST. NW STE 500

City	State	Zip Code
WASHINGTON	DC	20004-1319

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SA11.10138

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**CHESAPEAKE ENERGY CORPORATION FEDERAL PAC**

Mailing Address P.O. BOX 18496

City	State	Zip Code
OKLAHOMA CITY	OK	73154-0496

FEC ID number of contributing  
federal political committee.

C C00389288

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		11		2014

Transaction ID : SA11.10321

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**COALPAC**

Mailing Address 101 CONSTITUTION AVE. NW SUITE 500

City	State	Zip Code
WASHINGTON	DC	20001-2133

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		11		2014

Transaction ID : SA11.10296

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

4500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Mooney for Congress****A.** Full Name (Last, First, Middle Initial)  
**COMCAST CORPORATION & NBC UNIVERSAL PAC**Mailing Address **ONE COMCAST CENTER 1701 JFK BLVD.**

City	State	Zip Code
PHILADELPHIA	PA	19103-

FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

**Transaction ID : SA11.10112**

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**CSX CORPORATION GOOD GOVERNMENT FUND**Mailing Address **1331 PENNSYLVANIA AVE. NW SUITE 56**

City	State	Zip Code
WASHINGTON	DC	20004-1745

FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		16		2014

**Transaction ID : SA11.10376**

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**DEALERS ELECTION ACTION COMMITTEE**Mailing Address **412 FIRST STREET SE**

City	State	Zip Code
WASHINGTON	DC	20003-1804

FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

**Transaction ID : SA11.10113**

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

9500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)  
**DOMINION PAC**

Mailing Address P.O. BOX 26666

City State Zip Code  
RICHMOND VA 23261-6666

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

M M / D D / Y Y Y Y  
12 24 2014

Transaction ID : SA11.10186

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**EXXON MOBIL PAC**

Mailing Address 5959 LAS COLINAS BLVD.

City State Zip Code  
IRVING TX 75039-4202

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
12 18 2014

Transaction ID : SA11.10111

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**GENERAL ELECTRIC**

Mailing Address 1299 PENNSYLVANIA AVE, NW

City State Zip Code  
WASHINGTON DC 20004-2400

FEC ID number of contributing  
federal political committee.

C C00024869

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
12 18 2014

Transaction ID : SA11.10140

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

7500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	-------------------------------------	--	------------------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**Mooney for Congress**Full Name (Last, First, Middle Initial)  
**A. JOY GLOBAL, INC. PAC**

Mailing Address P.O. BOX 554

City	State	Zip Code
MILWAUKEE	WI	53201-0554

FEC ID number of contributing  
federal political committee.**C** C00334581

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	11	/	2014

Transaction ID : SA11.10320

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. K&L GATES LLP**

Mailing Address 1601 K STREET NW

City	State	Zip Code
WASHINGTON	DC	20006-1682

FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	18	/	2014

Transaction ID : SA11.10137

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS PAC**

Mailing Address 2901 TELESTAR CT.

City	State	Zip Code
FALLS CHURCH	VA	22042-1260

FEC ID number of contributing  
federal political committee.**C** C00005249

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	28	/	2014

Transaction ID : SA11.10245

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

4500.00

**TOTAL** This Period (last page this line number only).....



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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 NAME OF COMMITTEE (In Full)  
**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**NATIONAL EMERGENCY MEDICINE PAC**

Mailing Address PO BOX 619911

City

DALLAS

State

TX

Zip Code

75261-9911

FEC ID number of contributing federal political committee.

C C00140061

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		28		2014

Transaction ID : SA11.10251

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**PATRIOT COAL CORPORATION PAC**

Mailing Address 12312 OLIVE BLVD., SUITE 400

City

SAINT LOUIS

State

MO

Zip Code

63141-6448

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

7000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SA11.10114

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**SUSAN B. ANTHONY LIST CANDIDATE FUND**

Mailing Address 1707 STREET NW, STE. 550

City

WASHINGTON

State

DC

Zip Code

20036-

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

3500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SA11.10136

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 50 OF 71

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**THE DOW CHEMICAL COMPANY PAC****A.**

Mailing Address 2030 DOW CENTER

City

MIDLAND

State

MI

Zip Code

48674-1500

FEC ID number of contributing  
federal political committee.**C** C00074096

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2014

**Transaction ID : SA11.10148**

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**WALTERS ENERGY INC.****B.**

Mailing Address 3000 RIVERCHASE GALLERIA STE. 1700

City

BIRMINGHAM

State

AL

Zip Code

35244-2378

FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2014

**Transaction ID : SA11.10329**

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

4500.00

42000.00

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 51 OF 71

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**A. NICK CLEMENS**

Mailing Address PO BOX 785

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		28		2014

Amount of Each Disbursement this Period

3000.00
---------

Transaction ID : SB17.I775

**B. NICK CLEMENS**

Mailing Address PO BOX 785

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement  
REIMBURSEMENT

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		09		2014

Amount of Each Disbursement this Period

237.59
--------

Transaction ID : SB17.I782

FLAME CAMPAIGNS WEBSITE PROVIDER

**C. NICK CLEMENS**

Mailing Address PO BOX 785

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		12		2014

Amount of Each Disbursement this Period

3000.00
---------

Transaction ID : SB17.I794

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

6237.59

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 52 OF 71

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**A. STEPHANIE COOPER**

Mailing Address P.O. BOX 785

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		28		2014

Amount of Each Disbursement this Period

1500.00
---------

Transaction ID : SB17.I776

**B. STEPHANIE COOPER**

Mailing Address P.O. BOX 785

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement  
REIMBURSEMENT

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		19		2014

Amount of Each Disbursement this Period

56.19
-------

Transaction ID : SB17.I784

STAPLES

**C. STEPHANIE COOPER**

Mailing Address P.O. BOX 785

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		12		2014

Amount of Each Disbursement this Period

3000.00
---------

Transaction ID : SB17.I795

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4556.19

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 53 OF 71

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**A. EDWARD DACEY**

Mailing Address 1114A KANAWHA AVE.

City	State	Zip Code
DUNBAR	WV	25064

Purpose of Disbursement  
REIMBURSEMENT

006

Category/  
Type

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:	Primary	General
	Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		01		2014

Amount of Each Disbursement this Period

119.63
--------

Transaction ID : SB17.I778

STAPLES

**B. MR. RAINER KISSEL**

Mailing Address 749 NADENBOUSCH LN.

City	State	Zip Code
MARTINSBURG	WV	25403

Purpose of Disbursement  
REIMBURSEMENTCategory/  
Type

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:	Primary	General
	Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		22		2014

Amount of Each Disbursement this Period

68.53
-------

Transaction ID : SB17.I801

TRAVEL EXPENSES, GAS

**C. ADP, LLC**

Mailing Address ONE ADP DR., MS-100

City	State	Zip Code
AUGUSTA	GA	30909

Purpose of Disbursement  
PARKING SVCCategory/  
Type

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:	Primary	General
	Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		28		2014

Amount of Each Disbursement this Period

87.45
-------

Transaction ID : SB17.I809

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

275.61

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 54 OF 71

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**A. ADP, LLC**

Mailing Address ONE ADP DR., MS-100

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		23		2014

City	State	Zip Code
AUGUSTA	GA	30909

Purpose of Disbursement  
PAYROLL SVC

Amount of Each Disbursement this Period

1230.56
---------

Transaction ID : SB17.I830

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**B. ADP, LLC**

Mailing Address ONE ADP DR., MS-100

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		23		2014

City	State	Zip Code
AUGUSTA	GA	30909

Purpose of Disbursement  
PAYROLL TAXES

Amount of Each Disbursement this Period

426.19
--------

Transaction ID : SB17.I831

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**C. AMERICAN EXPRESS**

Mailing Address PO BOX 53852

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		02		2014

City	State	Zip Code
PHOENIX	AZ	85072

Purpose of Disbursement  
CREDIT CARD FEES

Amount of Each Disbursement this Period

7.95
------

Transaction ID : SB17.I813

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1664.70

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 55 OF 71

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**A. AMERICAN EXPRESS**

Mailing Address PO BOX 53852

City	State	Zip Code
PHOENIX	AZ	85072

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		05		2014

Amount of Each Disbursement this Period

50.76
-------

Transaction ID : SB17.I818

**B. AMTRAK**

Mailing Address 50 MASSACHUSETTS AVE. NE

City	State	Zip Code
WASHINGTON	DC	20002

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		03		2014

Amount of Each Disbursement this Period

158.00
--------

Transaction ID : SB17.I814

TRAIN

**C. AMTRAK**

Mailing Address 50 MASSACHUSETTS AVE. NE

City	State	Zip Code
WASHINGTON	DC	20002

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		11		2014

Amount of Each Disbursement this Period

272.00
--------

Transaction ID : SB17.I820

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

480.76

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 56 OF 71

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**A. BANK OF CHARLES TOWN**

Mailing Address P.O. BOX 906

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2014

Amount of Each Disbursement this Period

930.53
--------

Transaction ID : SB17.I823

RETURNED ITEM

**B. CAMPAIGN SOLUTIONS**

Mailing Address 117 NORTH SAINT ASOPH ST.

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement  
ONLINE FUNDRAISING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		19		2014

Amount of Each Disbursement this Period

105.53
--------

Transaction ID : SB17.I799

FUNDRAISING EMAILS

**C. CMDI**

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

City	State	Zip Code
TYSONS CORNER	VA	22182

Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		25		2014

Amount of Each Disbursement this Period

798.00
--------

Transaction ID : SB17.I804

CRIMSON

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

930.53



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 57 OF 71

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**A. CMDI**

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		26		2014

City	State	Zip Code
TYSONS CORNER	VA	22182

Amount of Each Disbursement this Period

32.80
-------

Purpose of Disbursement  
COMPLIANCE CONSULTINGCategory/  
Type

Transaction ID : SB17.I806

Candidate Name

FEE

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

**B. CMDI**

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		03		2014

City	State	Zip Code
TYSONS CORNER	VA	22182

Amount of Each Disbursement this Period

81.95
-------

Purpose of Disbursement  
CREDIT CARD FEESCategory/  
Type

Transaction ID : SB17.I816

Candidate Name

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

**C. CMDI**

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		04		2014

City	State	Zip Code
TYSONS CORNER	VA	22182

Amount of Each Disbursement this Period

20.13
-------

Purpose of Disbursement  
CREDIT CARD FEESCategory/  
Type

Transaction ID : SB17.I817

Candidate Name

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

134.88

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**A. CMDI**

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

City	State	Zip Code
TYSONS CORNER	VA	22182

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		10		2014

Amount of Each Disbursement this Period

57.75
-------

Transaction ID : SB17.I822

**B. CMDI**

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

City	State	Zip Code
TYSONS CORNER	VA	22182

Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		24		2014

Amount of Each Disbursement this Period

798.00
--------

Transaction ID : SB17.I828

CRIMSON

**C. CMDI**

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

City	State	Zip Code
TYSONS CORNER	VA	22182

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		17		2014

Amount of Each Disbursement this Period

45.35
-------

Transaction ID : SB17.I835

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

901.10

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 59 OF 71

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**A. COLD SPARK MEDIA**

Mailing Address 202 STATE ST 2ND FLOOR

City	State	Zip Code
HARRISBURG	PA	17101

Purpose of Disbursement  
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		12		2014

Amount of Each Disbursement this Period

10000.00
----------

Transaction ID : SB17.I790

**B. COMCAST**

Mailing Address 302 N MILDRED ST.

City	State	Zip Code
RANSON	WV	25438

Purpose of Disbursement  
UTILITIES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		09		2014

Amount of Each Disbursement this Period

192.54
--------

Transaction ID : SB17.I781

**C. CONQUEST**Mailing Address 2812 EMERYWOOD PKY  
STE. 103

City	State	Zip Code
RICHMOND	VA	23294

Purpose of Disbursement  
MESSAGE PHONE CALLS

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		12		2014

Amount of Each Disbursement this Period

10000.00
----------

Transaction ID : SB17.I793

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

20192.54

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 60 OF 71

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**A. CONQUEST**Mailing Address 2812 EMERYWOOD PKY  
STE. 103

City RICHMOND State VA Zip Code 23294

Purpose of Disbursement  
MESSAGE PHONE CALLS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		19		2014

Amount of Each Disbursement this Period

14927.00
----------

Transaction ID : SB17.I798

**B. COURTYARD BY MARRIOTT**

Mailing Address 450 CHERRINGTON PKWY

City CORAOPOLIS State PA Zip Code 15108

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		02		2014

Amount of Each Disbursement this Period

266.80
--------

Transaction ID : SB17.I812

HOTEL

**C. DISTINCTIVE GOURMET**

Mailing Address 200 CIVIC CENTER DR.

City CHARLESTON State WV Zip Code 25301

Purpose of Disbursement  
CATERING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		11		2014

Amount of Each Disbursement this Period

343.37
--------

Transaction ID : SB17.I785

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

15537.17

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**A. DOMINO'S PIZZA**

Mailing Address 201 N MILDRED ST.

City	State	Zip Code
RANSON	WV	25438

Purpose of Disbursement  
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		12		2014

Amount of Each Disbursement this Period

53.45
-------

Transaction ID : SB17.I827

FOOD FOR VOLUNTEERS

**B. DUQUESNE CLUB**

Mailing Address PO BOX 387

City	State	Zip Code
PITTSBURGH	PA	15230

Purpose of Disbursement  
CATERING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		12		2014

Amount of Each Disbursement this Period

766.17
--------

Transaction ID : SB17.I791

**C. FRONTIER COMMUNICATIONS**

Mailing Address 1398 S. WOODLAND BLVD. SUITE B

City	State	Zip Code
DELAND	FL	32720

Purpose of Disbursement  
UTILITIES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		12		2014

Amount of Each Disbursement this Period

59.94
-------

Transaction ID : SB17.I792

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

879.56

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**A. FRONTIER COMMUNICATIONS**

Mailing Address 1398 S. WOODLAND BLVD. SUITE B

City	State	Zip Code
DELAND	FL	32720

Purpose of Disbursement  
UTILITIES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		17		2014

Amount of Each Disbursement this Period

114.79
--------

Transaction ID : SB17.I797

**B. HOLIDAY INN EXPRESS**

Mailing Address MARTIN ST.

City	State	Zip Code
ELKINS	WV	26241

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		22		2014

Amount of Each Disbursement this Period

138.87
--------

Transaction ID : SB17.I832

**C. HOLIDAY INN EXPRESS**

Mailing Address MARTIN ST.

City	State	Zip Code
ELKINS	WV	26241

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		19		2014

Amount of Each Disbursement this Period

107.51
--------

Transaction ID : SB17.I834

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

361.17

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**A. MERCHANT E-SOLUTIONS**Mailing Address 3600 BRIDGE PARKWAY  
SUITE 102

City REDWOOD State CA Zip Code 94065

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		28		2014

Amount of Each Disbursement this Period

30.00
-------

Transaction ID : SB17.I808

**B. PILOT**

Mailing Address 3000 CHESTNUT RIDGE

City GRANTSVILLE State MD Zip Code 21536

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		01		2014

Amount of Each Disbursement this Period

41.00
-------

Transaction ID : SB17.I810

GAS

**C. PILOT**

Mailing Address 3000 CHESTNUT RIDGE

City GRANTSVILLE State MD Zip Code 21536

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		01		2014

Amount of Each Disbursement this Period

54.80
-------

Transaction ID : SB17.I811

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

125.80

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**A. POLITICAL EQUITY CONSULTING**

Mailing Address 3213 DUKE ST. #685

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement  
FUNDRAISING PHONE CALLS

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		09		2014

Amount of Each Disbursement this Period

4200.00
---------

Transaction ID : SB17.I783

**B. PUBLIC OPINION STRATEGIES, LLC**

Mailing Address 214 NORTH FAYETTE ST.

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement  
SURVEY RESEARCH

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		12		2014

Amount of Each Disbursement this Period

6500.00
---------

Transaction ID : SB17.I789

**C. SCHOOL OUTFITTERS**

Mailing Address 3736 REGENT AVE.

City	State	Zip Code
CINCINNATI	OH	45212

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		09		2014

Amount of Each Disbursement this Period

523.11
--------

Transaction ID : SB17.I819

TABLES

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

11223.11



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**A. SHARP TUSK LLC**

Mailing Address 107 S WEST ST.

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		28		2014

Amount of Each Disbursement this Period

9500.00
---------

Transaction ID : SB17.I777

**B. SHEETZ**

Mailing Address 8332 MARTINSBURG PIKE

City	State	Zip Code
SHEPHERDSTOWN	WV	25443

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		28		2014

Amount of Each Disbursement this Period

30.00
-------

Transaction ID : SB17.I807

GAS

**C. SHELL**

Mailing Address 419 VIRGINIA AVE.

City	State	Zip Code
PETERSBURG	WV	26847

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2014

Amount of Each Disbursement this Period

42.50
-------

Transaction ID : SB17.I825

GAS

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

9572.50

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**A. SHELL**

Mailing Address 419 VIRGINIA AVE.

City	State	Zip Code
PETERSBURG	WV	26847

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		30		2014

Amount of Each Disbursement this Period

50.01
-------

Transaction ID : SB17.I833

GAS

**B. STAPLES**

Mailing Address 160 PATRICK HENRY WAY

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		04		2014

Amount of Each Disbursement this Period

71.52
-------

Transaction ID : SB17.I787

**C. STAPLES**

Mailing Address 160 PATRICK HENRY WAY

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		12		2014

Amount of Each Disbursement this Period

523.59
--------

Transaction ID : SB17.I788

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

645.12

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**A. SUNCO**

Mailing Address 1422 BLAIR RD.

City	State	Zip Code
HALLTOWN	WV	25423

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		26		2014

Amount of Each Disbursement this Period

21.45
-------

Transaction ID : SB17.I805

GAS

**B. SUNCO**

Mailing Address 1422 BLAIR RD.

City	State	Zip Code
HALLTOWN	WV	25423

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		18		2014

Amount of Each Disbursement this Period

38.00
-------

Transaction ID : SB17.I836

GAS

**C. SWEET SPRINGS LIBERTY**

Mailing Address 34357 CHARLES TOWN PIKE

City	State	Zip Code
PURCELLVILLE	VA	20132

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2014

Amount of Each Disbursement this Period

47.00
-------

Transaction ID : SB17.I826

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

106.45

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**A. THE CONGRESSIONAL CLUB**

Mailing Address 2001 NEW HAMPSHIRE AVE., NW

City	State	Zip Code
WASHINGTON	DC	20009

Purpose of Disbursement  
MEMBERSHIP

Candidate Name

Office Sought:	House
	Senate
	President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
12 / 17 / 2014

Amount of Each Disbursement this Period

918.30
--------

Transaction ID : SB17.I796

ONE YEAR MEMBERSHIP

**B. UNITED AIRLINES INC.**

Mailing Address 233 S. WACKER DR.

City	State	Zip Code
CHICAGO	IL	60606

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:	House
	Senate
	President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
12 / 23 / 2014

Amount of Each Disbursement this Period

406.20
--------

Transaction ID : SB17.I829

**C. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD.

City	State	Zip Code
PHOENIX	AZ	85034

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:	House
	Senate
	President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
12 / 03 / 2014

Amount of Each Disbursement this Period

362.10
--------

Transaction ID : SB17.I815

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

918.30

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**A. US AIRWAYS**

Mailing Address 4000 E. SKY HARBOR BLVD.

City	State	Zip Code
PHOENIX	AZ	85034

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		11		2014

Amount of Each Disbursement this Period

25.00
-------

Transaction ID : SB17.I821

TRAVEL INSURANCE

**B. USPS**

Mailing Address 1355 COURTHOUSE DR

City	State	Zip Code
MARTINSBURG	WV	21701

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		09		2014

Amount of Each Disbursement this Period

2943.00
---------

Transaction ID : SB17.I780

**c. USPS**

Mailing Address 1355 COURTHOUSE DR

City	State	Zip Code
MARTINSBURG	WV	21701

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		29		2014

Amount of Each Disbursement this Period

500.00
--------

Transaction ID : SB17.I803

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3468.00

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 70 OF 71

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Mooney for Congress**

Full Name (Last, First, Middle Initial)

**A. VERIZON**

Mailing Address PO BOX 4003

City	State	Zip Code
ACWORTH	GA	30101

Purpose of Disbursement  
UTILITIES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		19		2014

Amount of Each Disbursement this Period

800.00
--------

Transaction ID : SB17.I800

**B. WAWA INC.**

Mailing Address

City	State	Zip Code
MEDIA	PA	19063

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2014

Amount of Each Disbursement this Period

51.00
-------

Transaction ID : SB17.I824

GAS

**C. WVGOP**

Mailing Address PO BOX 2711

City	State	Zip Code
CHARLESTON	WV	25330

Purpose of Disbursement  
RENT

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		11		2014

Amount of Each Disbursement this Period

138.63
--------

Transaction ID : SB17.I786

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

989.63

79200.71

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 71 OF 71

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**Mooney for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Conquest Communications Group**

Nature of Debt (Purpose):

Primary

Mailing Address 2812 Emerywood Pky Ste. 103

City State

Zip Code

Richmond

VA

23294

Outstanding Balance Beginning This Period

55861.00

Transaction ID : 1

Amount Incurred This Period

0.00

Payment This Period

24927.00

Outstanding Balance at Close of This Period

30934.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ..... ►

30934.00

2) **TOTALS** This Period (last page this line number only) ..... ►

30934.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

30934.00